Title/Subject: Continuous Quality Improvement (CQI) Policy for the Texas A&M University College of Medicine

Applies to: ☑ faculty ☑ students ☑ staff ☑ Other – affiliates where applicable.

☑ Policy ☐ System ☑ Process/Procedure ☐ Guideline/Standard ☐ Position Description

● Introduction
    o Historical/Contextual Overview: The Liaison Committee on Medical Education (LCME) requires that medical schools engage in a systematic process of planning and quality improvement. The LCME implemented the requirement based on research that identified factors associated with severe accreditation action. The LCME determined that medical schools would benefit from developing and implementing a quality improvement process.

    o Reason for the Policy: LCME Standard 1.1 states: A medical school engages in ongoing planning and continuous quality improvement processes that establish short- and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve programmatic quality, and ensure effective monitoring of the medical education program’s compliance with accreditation standards. While the medical school may implement and benefit from a quality improvement process in general, this policy focuses on the process as it pertains to the LCME accreditation elements.

● Policy Statement: It is the policy of the Texas A&M College of Medicine (TAMU-COM) to continuously engage in ongoing quality improvement of all college policies, programs, and processes. This practice ensures that the medical school is achieving its mission, goals, and objectives in accordance with its Strategic Plan, and that the medical school is in compliance with the Liaison Committee on Medical Education (LCME) accreditation standards.

The Office of Continuous Quality Improvement (OCQI) supports a system for monitoring the college’s strategic planning efforts and LCME standards and elements through a continuous quality improvement plan that involves COM leadership, faculty, staff, students, and community stakeholders. The results of the CQI process may be used to inform policy or procedure revisions, make recommendations to committees and COM leadership, and identify short- and long-term goals for specific LCME elements.

At TAMU-COM, CQI monitoring is governed by the Academic Council (AC). The AC ensures that core CQI data metrics are reported on a regular basis by OCQI in partnership with and the assistance and input of other offices including the Office of Academic Affairs, the Office of Student Affairs, the Office of Admissions, the Office of Evaluation and Assessment, and the Office of Diversity and Inclusion. The AC meets at least quarterly.

TAMU-COM routinely monitors the LCME elements identified as priorities for improving educational quality. Criteria for selecting priority elements are based on the categories outlined within the LCME white paper, Implementing a System for Monitoring Performance in LCME Accreditation Standards. These criteria include:

    o Elements that pose accreditation risks based on prior LCME citations,
Elements that include language that monitoring is required or involved a regularly-occurring process,
- New elements or elements where LCME expectations have evolved,
- Elements that include policies that must be congruent with current operations, and
- Elements that directly or indirectly affect the core operations of the school.

The Office of Continuous Quality Improvement (OCQI) maintains a schedule for the review of LCME standards and elements. Elements are reviewed to ensure all policies, procedures, and processes meet the LCME standards and provide the best educational experience for students and faculty. The following table outlines the individuals/groups responsible for the element under review, timeline for monitoring the element, data sources used in the review process, individuals/groups receiving the results, and the current risk assessment.

<table>
<thead>
<tr>
<th>Elements to be monitored</th>
<th>Individuals/Group Responsible for Review</th>
<th>Timing of Monitoring of the Element</th>
<th>Data Source(s) used to Monitor the Element</th>
<th>Individuals/Group Receiving the Results</th>
<th>Current Risk Assessment</th>
</tr>
</thead>
</table>

**Revision History:**

<table>
<thead>
<tr>
<th>Date of Change</th>
<th>Authority</th>
<th>Summary of Changes</th>
<th>Document Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 5, 2019</td>
<td>COM EC</td>
<td>Approved.</td>
<td>LCME Shared Google Drive</td>
</tr>
<tr>
<td>August 7, 2019</td>
<td>COM EC</td>
<td>Approved. Updated and converted to new format.</td>
<td>LCME Shared Google Drive</td>
</tr>
</tbody>
</table>

**Authority:** College of Medicine Executive Committee

**Policy/Process POC:** Office of Continuous Quality Improvement

**Effective Date:** September 1, 2019.

**Review/Revision Schedule:** Annually

**Indexed as:**